

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|------------|--------------|----------------|
| FEE DETERMINATION | <i>Wag</i> | | <i>4/27/00</i> |
| O.I.P.E. CLASSIFIER | | | <i>7-5-00</i> |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | <i>60574</i> | <i>7-6-00</i> |

INDEX OF CLAIMS

- ✓ Rejected N Non-elected
- = Allowed I Interference
- (Through numeral)... Canceled A Appeal
- + Restricted O Objected

| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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